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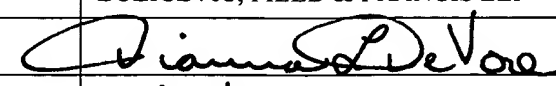
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CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to Commissioner for Patents, Washington, D.C. 20231			
Typed or Printed Name	Wilhelm Albert Palmen Jr.		
Signature		Date	January 10, 2001
TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Attorney Docket	OLIG-017CON
		First Named Inventor	Roderic M.K. Dale
		Application Number	09/669,033
		Filing Date	September 25, 2000
		Group Art Unit	1631
		Examiner Name	Unassigned
		title	



ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Amendment/Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement, 1449 and 0 references <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 (with copy of Notice to File Missing Parts)	<input type="checkbox"/> Issue Fee Transmittal (with copy of PTOL-85B) <input type="checkbox"/> Formal Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney <input type="checkbox"/> Revocation <input type="checkbox"/> Associate <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement	<input type="checkbox"/> Request for Refund <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below): Return Postcard _____ _____ _____

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Individual Name	Dianna L. DeVore	Registration No.	42,484
Firm Name	BOZICEVIC, FIELD & FRANCIS LLP		
Signature			
Date	1/10/01		